

S-E-C-R-E-T

18 January 1963

25X1

MEMORANDUM TO: Trainees of Course #5

The following information is required in order to prepare the
necessary documentation for travel to Please
complete the form and return it as soon as possible to
 Training Assistance Staff, OTR, Room GD-5309.

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FULL NAME:

OFFICE, DIVISION, BRANCH:

TELEPHONE EXT.:

POSITION TITLE:

BADGE NO.:

DATE AND PLACE OF BIRTH:

HEIGHT:

WEIGHT:

COLOR OF HAIR:

COLOR OF EYES:

CLOTHING SIZES:

JACKET:
TROUSERS:
SHIRT:
SOCKS:
CAP:
BOOTS:

NAME, ADDRESS AND PHONE NO. OF
NEAREST RELATIVE FOR EMERGENCIES:

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18 January 1963

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MEMORANDUM FOR: Trainees of [redacted]
SUBJECT : Innoculations

25X1 1. Prior to departing the United States for the [redacted] in
[redacted] each participant in the training program will require the
following inoculations:

- a. Smallpox
- b. Typhoid
- c. Tetanus
- d. Typhus
- e. Yellow Fever
- f. Polio

2. A period of not less than a month should be allowed for the full series. It is the trainee's responsibility to insure that he receives the full series of shots.

25X1 3. The shots may be gotten at the dispensary at [redacted] or
at the Immunization Branch, Headquarters [redacted].

4. Anti-malaria prophylaxis will also be required. Each trainee will be issued a box of anti-malaria tablets which he must start taking as directed one week before going to [redacted] until one week after he returns.

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[redacted]

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